APPLICATION DATA SHEET

Application Information

Application Type:: Regular Subject Matter:: Utility CD-ROM or CD-R?:: None

Title:: GOLF BALL

Attorney Docket Number:: P-6028U1-1-1-1-C1

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No
Petition Included?::

No
Secrecy Order in Parent Application?::

No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: R. Dennis

Family Name:: Nesbitt

City of Residence:: Beverly Hills

State or Province of Residence:: FL
Country of Residence:: US

Street of Mailing Address:: 5364 N. Bronco Terrace

City of Mailing Address:: Beverly Hills

State or Province of Mailing Address:: FL
Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 34465

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mark L. Family Name:: Binette

City of Residence:: Ludlow MA State or Province of Residence::

US Country of Residence::

241 Elizabeth Drive Street of Mailing Address::

City of Mailing Address:: Ludlow . State or Province of Mailing Address:: MA US Country of Mailing Address::

Postal or Zip Code of Mailing Address:: 01056

Applicant Authority Type:: Inventor US . Primary Citizenship Country::

Status::

Full Capacity Michael John Given Name::

Family Name:: Tzivanis Chicopee City of Residence::

State or Province of Residence:: MA Country of Residence:: US

Street of Mailing Address:: 36 Tolpa Court

City of Mailing Address:: Chicopee

State or Province of Mailing Address:: MA

US Country of Mailing Address::

Postal or Zip Code of Mailing Address:: 01020

Inventor Applicant Authority Type:: US Primary Citizenship Country::

Full Capacity Status::

Given Name:: John L. Family Name:: Nealon. Springfield City of Residence::

State or Province of Residence:: MA US Country of Residence::

Street of Mailing Address:: 32 Squirrel Road

City of Mailing Address:: Springfield

State or Province of Mailing Address:: MA US Country of Mailing Address:: 01108

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor US Primary Citizenship Country::

Full Capacity Status::

Thomas J. Given Name::

Family Name::

Kennedy,

Name Suffix::

Ш

City of Residence::

Wilbraham

State or Province of Residence::

MA

Country of Residence::

US

Street of Mailing Address::

3 Mirick Lane

City of Mailing Address::

Wilbraham

State or Province of Mailing Address::

MA US

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

01095

Applicant Authority Type::

Primary Citizenship Country::

Inventor

Status::

US

Full Capacity

Given Name::

Vincent J.

Family Name::

Simonds

City of Residence::

Brimfield

State or Province of Residence::

MA

Country of Residence::

US

Street of Mailing Address::

96 Paige Hill Road

City of Mailing Address::

Brimfield

State or Province of Mailing Address::

MA

Country of Mailing Address::

US

Postal or Zip Code of Mailing Address::

01010

Correspondence Information

Correspondence Customer Number::

24492

Phone number::

(413) 322-2937

Fax Number::

(413) 322-2575

E-Mail address::

mbugbee@topflite.com

Representative Information

Representative Customer Number::

24492

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation of	09/726,742	11/30/00
09/726,742	Continuation-in-part of	09/394,829	09/13/99
09/394,829	Continuation-in-part of	08/870,585	06/06/97
08/870,585	Continuation of	08/556,237	11/09/95
08/556,237	Continuation-in-part of	08/070,510	06/01/93
09/726,742	Continuation-in-part of	08/840,392	04/29/97
08/840,392	Continuation-in-part of	08/631,613	04/10/96
08/631,613	Continuation-in-part of	08/591,046	01/25/96
08/631,613	Continuation-in-part of	08/542,793	10/13/95
08/542,793	Continuation-in-part of	08/070,510	06/01/93
09/726,742	Claims benefit of	60/171,701	12/22/99

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
*			

Assignee Information

Assignee name:: The Top-Flite Golf Company

Street of Mailing Address:: 425 Meadow Street

P.O. Box 901

City of Mailing Address:: Chicopee

State or Province of Mailing Address:: MA
Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 01021-0901

Express Mail No. EV316699226US